

**Work Order ID 119751**

Wednesday, May 21, 2014 1:36:52 PM

**\*119751\***

Page 1

Item ID: D4943-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: EAPS Flex Hose w/ 90° Connection

Start Date: 7/11/2014 Start Qty: 8.00

**\*8\***

Cust Item ID:

Required Date: 7/11/2014 Req'd Qty: 8.00

**\*8\***

Customer:

Reference:

Approvals:

Process Plan:

CL

Date:

14/05/21

Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

Draw Nbr

Revision Nbr

D4943

B

100

0.00

**\*100\***

Purchasing

Memo

0.00

Purchasing

Issue P/O: 23323

Purchase part #: 12EAS12S-03900F

Possible supplier: AERO-FLEX

Certificate of conformity is required

CL 14/05/21 8

110

Receive &amp; Inspect for Damage &amp; Mat'l Certs

0.00

**\*110\***

Packaging

Memo

0.00

Packaging

Certificate of conformity is required.

14/7/3 8

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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**Work Order ID 119751**

Wednesday, May 21, 2014 1:36:52 PM

**\*119751\***

Page 2

Item ID: D4943-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

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Item Name: EAPS Flex Hose w/ 90° Connection

Start Date: 7/11/2014 Start Qty: 8.00

**\*8\***

Cust Item ID:

Required Date: 7/11/2014 Req'd Qty: 8.00

**\*8\***

Customer:

Reference:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

120

QC6- Inspect dimensions to drawing

0.00

**\*120\***

QC

Memo

0.00

Quality Control

130

Identify as per dwg & Stock Location: 51206

0.00

**\*130\***

Packaging

Memo

0.00

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

0.00

Quality Control

8x DAS JUL 04 2014  
28  
9-89MLJ 14-07-0714-7-4

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# Picklist Print

Wednesday, May 21, 2014 1:36:52 PM

Page 1

Work Order ID: 119751

\*119751\*

Parent Item: D4943-1

\*D4943-1\*

Parent Item Name: EAPS Flex Hose w/ 90° Connection

Start Date: 7/11/2014

Required Date: 7/11/2014

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP REV.A NEW ISSUE JFS 13/09/19 VERIFY BY: DD IPP  
REV.B 14.05.05 AS PER DWG REV.B DD VERIFY BY:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
12EAS1S2-03900F *12FAS1S2-03900F* FLEX HOSE		Purchased			No		Each	0.0000		8			

\*\*

6/4/7/3 8

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

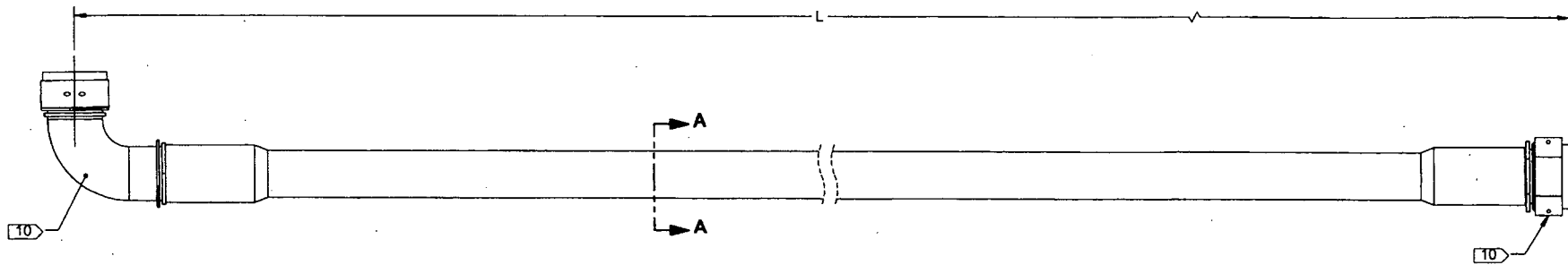
Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Doc/Data									
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Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

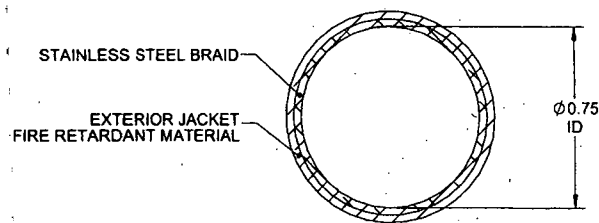
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# SPECIFICATION CONTROL DRAWING



**D4943-XX FLEX HOSE**



DART P/N	L	VENDOR	VENDOR P/N	WEIGHT
D4943-1	40.00	AERO-FLEX	12EAS12S-03900F	1.3 lbs

△

CL 14/05/21  
W/O: 119751

**RELEASED**  
2014-05-30

## NOTES:

- 1) MATERIAL: BRAID: STAINLESS STEEL PER MANUFACTURER  
JACKET: FIRE RETARDANT MATERIAL PER MANUFACTURER  
END FITTING: STAINLESS STEEL PER MANUFACTURER
- 2) FINISH: N/A
- 3) TOLERANCES: N/A
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: PER QSI 044 6.1.
- 7) WEIGHT: SEE TABLE
- 8) MAXIMUM OPERATING TEMPERATURE 500°F
- 9) MAXIMUM OPERATING PRESSURE 120 PSI
- 10) END FITTING REQUIREMENTS: FEMALE, 3/4, 37° JIC FITTING (THREAD 1-1/16 UN), WITH LOCKWIRE HOLES

B	SEE CHART: VENDOR WAS SWAGELOK, VENDOR P/N WAS SS-FJ12TA12AS12-40F. REASON: VENDOR CHANGED FOR LEADTIME ISSUES.	AJS	14.03.14
A	NEW ISSUE	AJS	13.09.18
REV.	DESCRIPTION	BY	DATE
DESIGN	AS	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	AJS		
CHECKED	AP	DRAWING NO. REV. B	
MFG. APPR.	JLM	D4943 SHEET 1 OF 1	
APPROVED	MP	TITLE SCALE	
DE APPR.	DS	FLEX HOSE NTS	
DATE	14.03.14	<small>COPYRIGHT © 2013 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small>	

APPROVED

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Doc/Data									
Equip/Tooling									
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Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
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### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO23323

Purchase Order Date 3/12/2014

PO Print Date 5/21/2014

Page Number 2 of 4

**Order From :**

AERO-FLEX CORP  
3147 JUPITER PARK CIR  
JUPITER, FLORIDA 33458  
USA

VU-AFL001

**Ship To :** DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**Contact Name**

**Vendor Phone** 561-745-2534

**Ship To Contact**

**Ship To Phone**

**Ship Via:** FedEx Priority First collect

**Ship Acct:**

**Buyer**

**Customer POID**

**Customer Tax #** 10127-2607

**Terms** Net 30

**Currency** USD

**FOB** FCA - (Free Carrier)

4	12EAS1S2-03900F	FLEX HOSE	7/11/2014	FN	8.00	\$499.00	\$3,99
			Yes		Each		
			7/11/2014				

Manufactuer as per drawing D4943  
rev.B  
B119751

Manufacture P/N 12EAS1S2-03900F

*14/7/13*

**Line Total:** \$3,99

5	12EAS1S2-03900F	FLEX HOSE	8/12/2014	FN	8.00	\$499.00	\$3,99
			Yes		Each		
			8/12/2014				

Manufactuer as per drawing D4943  
rev.B  
B119752

Manufacture P/N 12EAS1S2-03900F

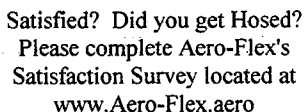
*SNP*  
*14/7/14*

**Line Total:** \$3,99

**Note:**

5/21/2014

Phone# 561-745-2534 Fax# 561-745-2537  
www.aero-flex.aero



## Certificate of Conformance

Date	Invoice #
6/30/2014	2151

Bill To	Ship To
Dart Aerospace Ltd 1270 Aberdeen Street Hawkesbury, ON K6A 1K7	SAME

AF S.O. #	Customer P.O. #	Ship Date	Via	FOB	Project
PO23323	PO23323	6/30/2014	Federal Express		PO23323

[illegible]

We hereby certify the above parts, including all materials, have been manufactured, tested and packed in conformance with all requirements of your order and the applicable government specifications and standards. Records of tests, inspections and certification indicating the above conformance are on file at Aero-Flex Corp. available for examination. It is hereby certified that any parts identified with TSO identification (a) were produced under Federal Aviation Administration (FAA) approved manufacturing and quality control system/methods as set forth in the FAA issued Technical Standard Order authorizations (TSO), and (b) such parts and/or materials are new and are in condition for safe operation. If applicable, satisfactory compliance with the conditions and tests required for TSO approval indicates the hose assembly has met the minimum performance standards in this TSO.

It is the responsibility of those desiring to install this hose assembly on an aircraft or engine to determine that the installation will not cause the hose assembly to be subjected to conditions in excess of those for which it has been approved. The hose assembly may only be installed in a manner acceptable to, or approved by, the Administrator.

The above commodities are subject to the Export Administration Regulations (EAR) and/or International Traffic in Arms Regulations (ITAR). If applicable, it is your responsibility to obtain a validated export license for this material from the Department of Commerce or the Department of State if so required under the applicable U.S. Govt. Export Control Regulation. The above material shall not be shipped to any country that has an embargo placed on it by the U.S. Govt or any entity on the U.S. Debarred list. By accepting the items on this PackSlip/C of C/Invoice you agree to Aero-Flex Corp's Terms and Conditions of Sale. These commodities, technology or software were exported from the United States in accordance with Export Administration Regulations. Diversion contrary to U.S. law is prohibited. These items may not be used directly or indirectly in prohibited nuclear, chemical, biological, or missile weapon activities.

Michael E. Smith

**Michael E. Scott**  
Quality Manager

Form 4QF015-01  
REV B

**Aero-Flex Corporation**  
 3147 Jupiter Park Circle, Ste. 2  
 Jupiter, Florida 33458  
 Ph 561.745.2534 Fax 561.745.2537



**PRESSURE TESTING / HELIUM MASS SPEC EXAMINATION REPORT**

TO Aero-Flex Corporation				FROM Jason Farris		DATE 06/03/2014		
PROJECT AF Dwg: 12EAS1S2-03900F Dwg Rev: - Part: 12EAS1S2-03900F Part Rev: -								
PURCHASE ORDER NO.				AF ROUTER NO.				
AF INVENTORY Line 1				STK3445				
ITEM	<input checked="" type="checkbox"/> Weld		<input type="checkbox"/> Castings		<input checked="" type="checkbox"/> Pipe		<input type="checkbox"/> Machined Parts	
	<input checked="" type="checkbox"/> Non-Weld		<input type="checkbox"/> Castings		<input checked="" type="checkbox"/> Pipe		<input type="checkbox"/> Machined Parts	
MATERIAL	Size 3/4"		No. of pieces 21		Type of Base Metal AUSS		Type of Filler Metal P8	
LOCATION	Aero-Flex Corporation				System PT-001			
Acceptance Standard CUSTOMER				Procedure AF 2QP024				
TYPE OF CHECK	<input checked="" type="checkbox"/> Initial		<input type="checkbox"/> In Process		<input type="checkbox"/> Rework		<input type="checkbox"/> 24 Hr	
							<input type="checkbox"/> 7 Day	
							<input checked="" type="checkbox"/> Final	
TYPE OF INSPECTION METHOD	<input checked="" type="checkbox"/> Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Bubble Test <input type="checkbox"/> HMST-Pressurized Components <input type="checkbox"/> HMST-Evacuated Components							
	Test Pressure/Vacuum 180		Test Temperature 75°F Ambient		HMST Test Instrument N/A			
	Test Medium/Concentration Potable Tap Water		Bubble Solution N/A		HMST Standard Leak N/A			
	Gage Mfr. McDaniel	Model FIP-GF	Range 0-3000 PSIG	ID Number AFCG301	Tracer Gas/Concentration N/A			
	Soak Time/Test Holding Time 10 Minutes Minimum				HMST Sensitivity Acceptance N/A			
Reference Summary CUTOMER DRAWING				Results of Inspection Satisfactory/Pass No Leaks were Detected.				
CopyTo: AF File		Requested By PO Contract		Reported By Jason Farris				
		<input type="checkbox"/> Customer Specifications <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Reject		Quality Designee Mike Neimark <i>Mn</i>				

NOTICE: THIS EXAMINATION REPORT IS A REPORT OF THE RESULTS OF THE TEST PROCEDURES ACTUALLY PERFORMED BY THIS COMPANY. IT IS SUBJECT TO THE LIMITATIONS OF THE TESTING SPECIFICATIONS AND PROCEDURES WHICH WERE UTILIZED. BY FURNISHING THIS REPORT, AERO-FLEX CORPORATION DOES NOT GUARANTEE ANY CONDITION OF THE TESTED SPECIMEN.

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## WELDING

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6/10/14

14F-1218

*FPI per ASTM E1417/E1417M-13 Type I, Method A, Sensitivity Level 3, Form A. Accept per AWS D17.1 Class B.*

FORM 200 REV 04/10